FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Davie Sports PAC, LLC Name	- RECEIVED					
(2) 4301 SWIOS Ave Address (number and street)	APR - 8 2010					
City, State, Zip Code	TOWN OF DAVIE Town Clerk's Office					
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
(4) Check appropriate box(es):  Candidate (office sought):  Political Committee  Committee of Continuous Existence  Party Executive Committee  Electioneering Communication	☐ CHECK IF PC HAS DISBANDED ☐ CHECK IF CCE HAS DISBANDED ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED					
(5) REPORT I	DENTIFIERS					
Cover Period: From <u>61</u> / <u>0 ( / /0</u> To	3 / 3 / / O Report Type					
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$ 350.00	Monetary Expenditures \$ 336, 75					
Loans \$	Transfers to Office Account \$					
Total Monetary \$	Total Monetary \$					
In-Kind \$						
	(8) Other Distributions \$					
(9) TOTAL Monetary Contributions To Date \$ 765.00	(10) TOTAL Monetary Expenditures To Date \$ 689.75					
(11) CERTIFICATION It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, correct, and complete.  (Type name)  (Type name)	Candidate  Candidate  Signature  I certify that I have examined this report and it is true, correct, and complete.  (Type name)  (Type name)  (Type name)  (Type name)  (Type name)  (Thairperson (only for PC, PTY & electioneering conimup, organization)					

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Davie Sports PAC, LLC (2) I.D. Number									
(3) Cover Period	<b>A</b> .			31/10	(4) Page	1 0	f <u>1</u>		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES  1) Name Davie Sports PAC, LLC (2) I.D. Number (2) I.D. Nu									
	d 0(10(10) through 03/		4) Page	_( of					
(5)	(7)	(8)	(9)	(10)	(11)				
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount				
0/0/1	Earthplaza P.O. 130x 550193 Fl. Laudendele (7237355	wesite hosting revolut	non		198.00				
0/0/2	Fla Dept of Solate Div of Corporations P.O. Pox 6198 Tallahossas FL 52314	annual roport payment	MO N		/38.75				
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